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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Scott, Attica, Woodson, ,		ook if add-	00 050==- 1		2 Condidates FFO	ntification Number	
	(b) Address (number and street) 3118 Hale Avenue	☐ Check if address changed				Candidate's FEC Identification Number H2KY03172		
	(c) City, State, and ZIP Code						ew Amended	
_	Louisville		KY	4021		Statement X (N	N) OR (A)	
4.	Party Affiliation	5. Office Sough	t			rict of Candidate		
	DEMOCRATIC PARTY	House			KY	03		
	DE	SIGNATION	OF PR	INCIPAL	CAMPAIGN	N COMMITTEE		
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s). (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	Attica Scott for Cong	gress						
	(b) Address (number and street)							
	P.O. Box 581218							
	(c) City, State, and ZIP Code							
	Louisville				KY	40286		
	DE	SIGNATION	OF OT	HFR AU	THORIZED	COMMITTEES		
	52				ng Representative			
8.	I hereby authorize the following nan candidacy.	ned committee, v	vhich is NO⁻	Γ my princip	al campaign con	nmittee, to receive and ex	spend funds on behalf of my	
	NOTE: This designation should be f	iled with the prin	cipal campa	ign commit	ee.			
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
_								
	·	mined this State	ment and to	the best of	my knowledge a	and belief it is true, correct	t and complete.	
	gnature of Candidate					Date		
Sc	cott, Attica, Woodson, ,	[Electronically Filed]				07/05/2021		
					<i>y</i>			
N	OTE: Submission of false, erroneous	or incomplete in	formation m	nay subject	the person signir	ng this Statement to penal	Ities of 2 U.S.C. §437g.	
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FEC FORM 2 (REV. 02/2009)